

**Fill in this information to identify your case and this filing:**

Debtor 1	<b>IRA</b>	<b>CHARLES</b>	<b>GAMBLE, II</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>CRYSTAL</b>	<b>LASHAWN</b>	<b>GAMBLE</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)	<b>16-36498-H1-13</b>		

Check if this is an amended filing

**Official Form 106A/B****Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In****1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

- No. Go to Part 2.  
 Yes. Where is the property?

1.1.

**3823 Teal Maple Ct**

Street address, if available, or other description

**What is the property?**

Check all that apply.

- Single-family home  
 Duplex or multi-unit building  
 Condominium or cooperative  
 Manufactured or mobile home  
 Land  
 Investment property  
 Timeshare  
 Other

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?      Current value of the portion you own?**

**\$180,000.00      \$180,000.00**

**Fresno      TX      77545**  
City                  State    ZIP Code

**Fort Bend**  
County

**Lot 20, Block 1, Estates of Teal Run,  
Section 6  
Deed dated: July 2006**

**Who has an interest in the property?**

Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Fee Simple**

Check if this is community property  
(see instructions)

**Other information you wish to add about this item, such as local property identification number:** 2935060010200907

**2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....**

**\$180,000.00**

**Part 2: Describe Your Vehicles**

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.**

**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- No  
 Yes

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 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

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3.1.	Make: <u>Mercedes Benz</u>	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: <i>Creditors Who Have Claims Secured by Property.</i>
	Model: <u>E350</u>	<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<b>Current value of the entire property?</b> <u>\$20,000.00</u> <b>Current value of the portion you own?</b> <u>\$20,000.00</u>
	Year: <u>2012</u>		
	Approximate mileage: <u>43,000</u>		
	Other information: <b>2012 Mercedes Benz E350</b>	<input checked="" type="checkbox"/> Check if this is community property (see instructions)	
3.2.	Make: <u>Chrysler</u>	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: <i>Creditors Who Have Claims Secured by Property.</i>
	Model: <u>300</u>	<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<b>Current value of the entire property?</b> <u>\$4,000.00</u> <b>Current value of the portion you own?</b> <u>\$4,000.00</u>
	Year: <u>2006</u>		
	Approximate mileage: <u>140,000</u>		
	Other information: <b>2006 Chrysler 300</b>	<input checked="" type="checkbox"/> Check if this is community property (see instructions)	
3.3.	Make: <u>Nissan</u>	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: <i>Creditors Who Have Claims Secured by Property.</i>
	Model: <u>Armada</u>	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<b>Current value of the entire property?</b> <u>\$5,000.00</u> <b>Current value of the portion you own?</b> <u>\$5,000.00</u>
	Year: <u>2006</u>		
	Approximate mileage: <u>130,000</u>		
	Other information: <b>2006 Nissan Armada</b>	<input checked="" type="checkbox"/> Check if this is community property (see instructions)	
3.4.	Make: <u>Yamaha</u>	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: <i>Creditors Who Have Claims Secured by Property.</i>
	Model: <u>V-Star</u>	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<b>Current value of the entire property?</b> <u>\$5,000.00</u> <b>Current value of the portion you own?</b> <u>\$5,000.00</u>
	Year: <u>2012</u>		
	Approximate mileage: <u>8,500</u>		
	Other information: <b>2012 Yamaha V-Star Motorcycle</b>	<input checked="" type="checkbox"/> Check if this is community property (see instructions)	
3.5.	Make: <u>Ford</u>	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: <i>Creditors Who Have Claims Secured by Property.</i>
	Model: <u>Freestar</u>	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<b>Current value of the entire property?</b> <u>\$1,000.00</u> <b>Current value of the portion you own?</b> <u>\$1,000.00</u>
	Year: <u>2004</u>		
	Approximate mileage: <u>160,000</u>		
	Other information: <b>2004 Ford Freestar Van</b>	<input checked="" type="checkbox"/> Check if this is community property (see instructions)	
3.6.	Make: <u>Chevrolet</u>	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: <i>Creditors Who Have Claims Secured by Property.</i>
	Model: <u>Express</u>	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<b>Current value of the entire property?</b> <u>\$9,000.00</u> <b>Current value of the portion you own?</b> <u>\$9,000.00</u>
	Year: <u>2007</u>		
	Approximate mileage: <u>9,000</u>		
	Other information: <b>2007 Chevrolet Express</b>	<input checked="" type="checkbox"/> Check if this is community property (see instructions)	

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories***Examples:* Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No  
 Yes

**5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....**\$44,000.00**Part 3: Describe Your Personal and Household Items****Do you own or have any legal or equitable interest in any of the following items?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**6. Household goods and furnishings***Examples:* Major appliances, furniture, linens, china, kitchenware

- No  
 Yes. Describe..... **See continuation page(s).**

\$4,315.00**7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- No  
 Yes. Describe..... **See continuation page(s).**

\$925.00**8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- No  
 Yes. Describe..... **See continuation page(s).**

\$110.00**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- No  
 Yes. Describe..... **Treadmill \$75.00  
Weights \$75.00  
3 Bikes \$30.00**

\$180.00**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

- No  
 Yes. Describe.....

\_\_\_\_\_**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

- No  
 Yes. Describe..... **See continuation page(s).**

\$970.00**12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

- No  
 Yes. Describe..... **See continuation page(s).**

\$220.00**13. Non-farm animals***Examples:* Dogs, cats, birds, horses

- No  
 Yes. Describe.....

\_\_\_\_\_

Debtor 1 **IRA CHARLES GAMBLE, II**  
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14. Any other personal and household items you did not already list, including any health aids you did not list

No  
 Yes. Give specific information..... See continuation page(s).

\$220.00

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....

\$6,940.00

#### Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No  
 Yes..... Cash: ..... \$40.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No  
 Yes..... Institution name:

17.1.	Checking account:	<b>Smart Financial Credit Union #4930</b>	<b>\$15.01</b>
17.2.	Checking account:	<b>Wells Fargo Bank #2994</b>	<b>\$8,972.90</b>
17.3.	Savings account:	<b>Smart Financial Credit Union #4940</b>	<b>\$10.17</b>
17.4.	Savings account:	<b>Wells Fargo Bank #8908</b>	<b>\$0.00</b>

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No  
 Yes..... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No  
 Yes. Give specific information about them..... Name of entity: % of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

No  
 Yes. Give specific information about them..... Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No  
 Yes. List each account separately. Type of account: Institution name:

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401(k) or similar plan:	<b>Boise Cascade Company 401(k) Plan</b>	<b>\$4,000.00</b>
IRA:	<b>Wells Fargo IRA (open but unfunded)</b>	<b>\$0.00</b>

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes.....

Institution name or individual:

**23. Annuities** (A contract for a specific periodic payment of money to you, either for life or for a number of years) No Yes.....

Issuer name and description:

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes.....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit** No Yes. Give specific information about them

\_\_\_\_\_

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;***Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them

\_\_\_\_\_

**27. Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them

\_\_\_\_\_

**Money or property owed to you?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you** No Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal: \_\_\_\_\_

State: \_\_\_\_\_

Local: \_\_\_\_\_

**29. Family support***Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information

Alimony: \_\_\_\_\_

Maintenance: \_\_\_\_\_

Support: \_\_\_\_\_

Divorce settlement: \_\_\_\_\_

Property settlement: \_\_\_\_\_

Debtor 1 **IRA CHARLES GAMBLE, II**  
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Case number (if known) **16-36498-H1-13****30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

 No Yes. Give specific information **Current wages****\$1,641.20****31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

 No Yes. Name the insurance company of each policy

and list its value..... Company name:

Beneficiary:

Surrender or refund value:

<b>Lincoln Benefit Life Company</b>	<b>Crystal Gamble</b>	<b>\$0.00</b>
<b>Lincoln Benefit Life Company</b>	<b>Ira Gamble</b>	<b>\$0.00</b>
<b>Employer paid life insurance</b>	<b>Crystal Gamble</b>	<b>\$0.00</b>

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

 No Yes. Give specific information**\_\_\_\_\_****33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

 No Yes. Describe each claim.....**\_\_\_\_\_****34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims** No Yes. Describe each claim.....**\_\_\_\_\_****35. Any financial assets you did not already list** No Yes. Give specific information**\_\_\_\_\_****36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.****\$14,679.28****Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?** No. Go to Part 6. Yes. Go to line 38.

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned** No Yes. Describe.. **Unpaid child care fees for KidCare Learning Academy****\$1,100.00**

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**39. Office equipment, furnishings, and supplies**

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

No

Yes. Describe.. **2 Office computers \$250.00**

Office desk \$75.00

Office chair \$50.00

Office printer \$100.00

8 Playpens \$60.00

29 Cots \$200.00

9 Highchairs \$90.00

3 Infant chair/bouncers \$15.00

3 Walkers \$20.00

6 Classroom tables \$300.00

5 Cafeteria serving tables \$50.00

65 Children chairs \$100.00

Television \$20.00

2 Radio/cd players \$40.00

8 Shelves \$60.00

3 Drawers \$15.00

Refrigerator \$200.00

Microwave \$50.00

5 Kitchen storage and shelves \$400.00

Kitchen serving island \$100.00

Children's toys \$100.00

\$2,295.00

**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

No

Yes. Describe..

\_\_\_\_\_

**41. Inventory**

No

Yes. Describe..

\_\_\_\_\_

**42. Interests in partnerships or joint ventures**

No

Yes. Describe..... Name of entity:

% of ownership:

**43. Customer lists, mailing lists, or other compilations**

No

Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

No

Yes. Describe.....

\_\_\_\_\_

**44. Any business-related property you did not already list**

No

Yes. Give specific information.

**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here..... →**

**\$3,395.00**

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

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**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
 If you own or have an interest in farmland, list it in Part 1.

**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- No. Go to Part 7.  
 Yes. Go to line 47.

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**47. Farm animals**

*Examples:* Livestock, poultry, farm-raised fish

- No  
 Yes....

---

**48. Crops--either growing or harvested**

- No  
 Yes. Give specific information.....

---

**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

- No  
 Yes....

---

**50. Farm and fishing supplies, chemicals, and feed**

- No  
 Yes....

---

**51. Any farm- and commercial fishing-related property you did not already list**

- No  
 Yes. Give specific information.....

---

**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here. →**

\$0.00

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

**53. Do you have other property of any kind you did not already list?**

*Examples:* Season tickets, country club membership

- No  
 Yes. Give specific information.

**54. Add the dollar value of all of your entries from Part 7. Write that number here. →**

\$0.00

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

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**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2.....	→	\$180,000.00
56. Part 2: Total vehicles, line 5		<u>\$44,000.00</u>
57. Part 3: Total personal and household items, line 15		<u>\$6,940.00</u>
58. Part 4: Total financial assets, line 36		<u>\$14,679.28</u>
59. Part 5: Total business-related property, line 45		<u>\$3,395.00</u>
60. Part 6: Total farm- and fishing-related property, line 52		<u>\$0.00</u>
61. Part 7: Total other property not listed, line 54	+	<u>\$0.00</u>
62. Total personal property. Add lines 56 through 61.....		<span style="border: 1px solid black; padding: 2px;">\$69,014.28</span>
		Copy personal property total → + <u>\$69,014.28</u>
63. Total of all property on Schedule A/B. Add line 55 + line 62.....		<span style="border: 1px solid black; padding: 2px;">\$249,014.28</span>

Debtor 1 **IRA CHARLES GAMBLE, II**  
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**6. Household goods and furnishings (details):**

<b>2 Sofas</b>	<u>\$100.00</u>
<b>2 Love Seats</b>	<u>\$100.00</u>
<b>Recliner</b>	<u>\$50.00</u>
<b>2 Arm Chairs</b>	<u>\$120.00</u>
<b>2 Lamps</b>	<u>\$20.00</u>
<b>Desk</b>	<u>\$25.00</u>
<b>Dining Table</b>	<u>\$150.00</u>
<b>6 Dining Chairs</b>	<u>\$125.00</u>
<b>Kitchen Table</b>	<u>\$150.00</u>
<b>8 Chairs</b>	<u>\$125.00</u>
<b>3 Beds</b>	<u>\$450.00</u>
<b>3 Dressers</b>	<u>\$200.00</u>
<b>3 Chest Drawers</b>	<u>\$150.00</u>
<b>3 Night Stands</b>	<u>\$75.00</u>
<b>6 Trash Cans</b>	<u>\$5.00</u>
<b>4 Outdoor Chairs and Table</b>	<u>\$125.00</u>
<b>Sheets</b>	<u>\$10.00</u>
<b>Blankets</b>	<u>\$50.00</u>
<b>Pillows</b>	<u>\$20.00</u>
<b>Towels/Cloths</b>	<u>\$25.00</u>
<b>Curtains</b>	<u>\$100.00</u>
<b>Aprons</b>	<u>\$50.00</u>
<b>Tablecloths/Runners</b>	<u>\$10.00</u>
<b>Napkins</b>	<u>\$5.00</u>
<b>Chair Covers</b>	<u>\$5.00</u>
<b>Bags</b>	<u>\$5.00</u>
<b>Refrigerator</b>	<u>\$1,500.00</u>
<b>Stove</b>	<u>\$75.00</u>
<b>Microwave Oven</b>	<u>\$100.00</u>
<b>Kitchen Appliances</b>	<u>\$50.00</u>
<b>Washing Machine</b>	<u>\$60.00</u>
<b>Dryer</b>	<u>\$75.00</u>
<b>Vacuum Cleaner</b>	<u>\$25.00</u>

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Dishware	<u>\$70.00</u>
Glassware	<u>\$50.00</u>
Silverware	<u>\$10.00</u>
Pots & Pans	<u>\$50.00</u>
<b>7. Electronics (details):</b>	
Panasonic 60" TV \$50.00	<u>\$250.00</u>
Emerson 32" TV \$75.00	
JVC 60" TV \$75.00	
Haier 32" TV \$50.00	
AOC Computer \$150.00	<u>\$225.00</u>
HP Printer \$75.00	
Samsung Cell Phone \$75.00	<u>\$200.00</u>
iPhone \$125.00	
Canon Camera	<u>\$250.00</u>
<b>8. Collectibles of value (details):</b>	
5 Paintings	<u>\$60.00</u>
35 Books	<u>\$25.00</u>
41 Pictures	<u>\$25.00</u>
<b>11. Clothes (details):</b>	
Men's Clothing	<u>\$100.00</u>
Coats	<u>\$75.00</u>
Designer Wear	<u>\$75.00</u>
Shoes	<u>\$50.00</u>
Accessories	<u>\$70.00</u>
Women's Clothing	<u>\$100.00</u>
Furs	<u>\$100.00</u>
Coats	<u>\$100.00</u>
Designer Wear	<u>\$100.00</u>
Shoes	<u>\$100.00</u>
Accessories	<u>\$100.00</u>
<b>12. Jewelry (details):</b>	
Men's Wedding Ring	<u>\$20.00</u>
Woman's Wedding Ring	<u>\$200.00</u>
<b>14. Any other personal and household items you did not already list (details):</b>	
Household Tools	<u>\$20.00</u>
Keyboard	<u>\$50.00</u>
Drums	<u>\$50.00</u>

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Debtor 2 **CRYSTAL LASHAWN GAMBLE**

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**Holiday Decorations**

**\$100.00**

**Fill in this information to identify your case:**

Debtor 1	<b>IRA</b> First Name	<b>CHARLES</b> Middle Name	<b>GAMBLE, II</b> Last Name
Debtor 2 (Spouse, if filing)	<b>CRYSTAL</b> First Name	<b>LASHAWN</b> Middle Name	<b>GAMBLE</b> Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)	<b>16-36498-H1-13</b>		

Check if this is an amended filing

**Official Form 106C****Schedule C: The Property You Claim as Exempt**

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
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Brief description: <b>Lot 20, Block 1, Estates of Teal Run, Section 6</b>	Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
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Brief description: <b>Lot 20, Block 1, Estates of Teal Run, Section 6</b>	<b>\$180,000.00</b>	<input checked="" type="checkbox"/> <b>\$0.00</b>	<b>11 U.S.C. § 522(d)(1)</b>
<b>Deed dated: July 2006</b>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
<b>Parcel: 2935060010200907</b>			

Line from *Schedule A/B*: 1.1

Brief description: <b>2012 Mercedes Benz E350 (approx. 43000 miles)</b>	<b>\$20,000.00</b>	<input checked="" type="checkbox"/> <b>\$0.00</b>	<b>11 U.S.C. § 522(d)(5)</b>
<b>2012 Mercedes Benz E350</b>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from <i>Schedule A/B</i> : <u>3.1</u>			

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- No  
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
 No  
 Yes

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
Brief description: <b>2006 Chrysler 300 (approx. 140000 miles)</b> <b>2006 Chrysler 300</b> <b>(1st exemption claimed for this asset)</b> Line from <i>Schedule A/B</i> : <u>3.2</u>	<u>\$4,000.00</u>	<input checked="" type="checkbox"/> <b>\$3,775.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(2)</b>
Brief description: <b>2006 Chrysler 300 (approx. 140000 miles)</b> <b>2006 Chrysler 300</b> <b>(2nd exemption claimed for this asset)</b> Line from <i>Schedule A/B</i> : <u>3.2</u>	<u>\$4,000.00</u>	<input checked="" type="checkbox"/> <b>\$225.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Brief description: <b>2006 Nissan Armada (approx. 130000 miles)</b> Line from <i>Schedule A/B</i> : <u>3.3</u>	<u>\$5,000.00</u>	<input checked="" type="checkbox"/> <b>\$1,797.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(2)</b>
Brief description: <b>2012 Yamaha V-Star (approx. 8500 miles)</b> <b>2012 Yamaha V-Star Motorcycle</b> Line from <i>Schedule A/B</i> : <u>3.4</u>	<u>\$5,000.00</u>	<input checked="" type="checkbox"/> <b>\$0.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Brief description: <b>2004 Ford Freestar (approx. 160000 miles)</b> <b>2004 Ford Freestar Van</b> Line from <i>Schedule A/B</i> : <u>3.5</u>	<u>\$1,000.00</u>	<input checked="" type="checkbox"/> <b>\$1,000.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Brief description: <b>2007 Chevrolet Express (approx. 9000 miles)</b> <b>2007 Chevrolet Express</b> Line from <i>Schedule A/B</i> : <u>3.6</u>	<u>\$9,000.00</u>	<input checked="" type="checkbox"/> <b>\$0.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Brief description: <b>2 Sofas</b> Line from <i>Schedule A/B</i> : <u>6</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <b>\$100.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Brief description: <b>2 Love Seats</b> Line from <i>Schedule A/B</i> : <u>6</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <b>\$100.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Brief description: <b>Recliner</b> Line from <i>Schedule A/B</i> : <u>6</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <b>\$50.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
Brief description: <b>2 Arm Chairs</b>	<u>\$120.00</u>	<input checked="" type="checkbox"/> <b>\$120.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>2 Lamps</b>	<u>\$20.00</u>	<input checked="" type="checkbox"/> <b>\$20.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Desk</b>	<u>\$25.00</u>	<input checked="" type="checkbox"/> <b>\$25.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Dining Table</b>	<u>\$150.00</u>	<input checked="" type="checkbox"/> <b>\$150.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>6 Dining Chairs</b>	<u>\$125.00</u>	<input checked="" type="checkbox"/> <b>\$125.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Kitchen Table</b>	<u>\$150.00</u>	<input checked="" type="checkbox"/> <b>\$150.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>8 Chairs</b>	<u>\$125.00</u>	<input checked="" type="checkbox"/> <b>\$125.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>3 Beds</b>	<u>\$450.00</u>	<input checked="" type="checkbox"/> <b>\$450.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>3 Dressers</b>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <b>\$200.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			

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Case number (if known) 16-36498-H1-13**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
Brief description: <b>3 Chest Drawers</b>	<u>\$150.00</u>	<input checked="" type="checkbox"/> <b>\$150.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>3 Night Stands</b>	<u>\$75.00</u>	<input checked="" type="checkbox"/> <b>\$75.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>6 Trash Cans</b>	<u>\$5.00</u>	<input checked="" type="checkbox"/> <b>\$5.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>4 Outdoor Chairs and Table</b>	<u>\$125.00</u>	<input checked="" type="checkbox"/> <b>\$125.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Sheets</b>	<u>\$10.00</u>	<input checked="" type="checkbox"/> <b>\$10.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Blankets</b>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <b>\$50.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Pillows</b>	<u>\$20.00</u>	<input checked="" type="checkbox"/> <b>\$20.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Towels/Cloths</b>	<u>\$25.00</u>	<input checked="" type="checkbox"/> <b>\$25.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Curtains</b>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <b>\$100.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			

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Case number (if known) 16-36498-H1-13**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
Brief description: <b>Aprons</b>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <b>\$50.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Tablecloths/Runners</b>	<u>\$10.00</u>	<input checked="" type="checkbox"/> <b>\$10.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Napkins</b>	<u>\$5.00</u>	<input checked="" type="checkbox"/> <b>\$5.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Chair Covers</b>	<u>\$5.00</u>	<input checked="" type="checkbox"/> <b>\$5.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Bags</b>	<u>\$5.00</u>	<input checked="" type="checkbox"/> <b>\$5.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Refrigerator</b>	<u>\$1,500.00</u>	<input checked="" type="checkbox"/> <b>\$1,500.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Stove</b>	<u>\$75.00</u>	<input checked="" type="checkbox"/> <b>\$75.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Microwave Oven</b>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <b>\$100.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Kitchen Appliances</b>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <b>\$50.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			

Debtor 1 **IRA CHARLES GAMBLE, II**  
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Case number (if known) 16-36498-H1-13**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
Brief description: <b>Washing Machine</b>	<u>\$60.00</u>	<input checked="" type="checkbox"/> <b>\$60.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Dryer</b>	<u>\$75.00</u>	<input checked="" type="checkbox"/> <b>\$75.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Vacuum Cleaner</b>	<u>\$25.00</u>	<input checked="" type="checkbox"/> <b>\$25.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Dishware</b>	<u>\$70.00</u>	<input checked="" type="checkbox"/> <b>\$70.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Glassware</b>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <b>\$50.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Silverware</b>	<u>\$10.00</u>	<input checked="" type="checkbox"/> <b>\$10.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Pots &amp; Pans</b>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <b>\$50.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Panasonic 60" TV \$50.00</b> <b>Emerson 32" TV \$75.00</b> <b>JVC 60" TV \$75.00</b> <b>Haier 32" TV \$50.00</b>	<u>\$250.00</u>	<input checked="" type="checkbox"/> <b>\$250.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>7</u>			
Brief description: <b>AOC Computer \$150.00</b> <b>HP Printer \$75.00</b>	<u>\$225.00</u>	<input checked="" type="checkbox"/> <b>\$225.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>7</u>			

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Case number (if known) 16-36498-H1-13**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
Brief description: <b>Samsung Cell Phone \$75.00</b> <b>iPhone \$125.00</b>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <b>\$200.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>7</u>			
Brief description: <b>Canon Camera</b>	<u>\$250.00</u>	<input checked="" type="checkbox"/> <b>\$250.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>7</u>			
Brief description: <b>5 Paintings</b>	<u>\$60.00</u>	<input checked="" type="checkbox"/> <b>\$60.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>8</u>			
Brief description: <b>35 Books</b>	<u>\$25.00</u>	<input checked="" type="checkbox"/> <b>\$25.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>8</u>			
Brief description: <b>41 Pictures</b>	<u>\$25.00</u>	<input checked="" type="checkbox"/> <b>\$25.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>8</u>			
Brief description: <b>Treadmill \$75.00</b> <b>Weights \$75.00</b> <b>3 Bikes \$30.00</b>	<u>\$180.00</u>	<input checked="" type="checkbox"/> <b>\$180.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>9</u>			
Brief description: <b>Men's Clothing</b>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <b>\$100.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>11</u>			
Brief description: <b>Coats</b>	<u>\$75.00</u>	<input checked="" type="checkbox"/> <b>\$75.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>11</u>			
Brief description: <b>Designer Wear</b>	<u>\$75.00</u>	<input checked="" type="checkbox"/> <b>\$75.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>11</u>			

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Case number (if known) 16-36498-H1-13**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
Brief description: <b>Shoes</b>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <b>\$50.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>11</u>			
Brief description: <b>Accessories</b>	<u>\$70.00</u>	<input checked="" type="checkbox"/> <b>\$70.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>11</u>			
Brief description: <b>Women's Clothing</b>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <b>\$100.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>11</u>			
Brief description: <b>Furs</b>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <b>\$100.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>11</u>			
Brief description: <b>Coats</b>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <b>\$100.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>11</u>			
Brief description: <b>Designer Wear</b>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <b>\$100.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>11</u>			
Brief description: <b>Shoes</b>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <b>\$100.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>11</u>			
Brief description: <b>Accessories</b>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <b>\$100.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>11</u>			
Brief description: <b>Men's Wedding Ring</b>	<u>\$20.00</u>	<input checked="" type="checkbox"/> <b>\$20.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(4)</b>
Line from <i>Schedule A/B</i> : <u>12</u>			

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
Brief description: <b>Woman's Wedding Ring</b>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <b>\$200.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(4)</b>
Line from <i>Schedule A/B</i> : <u>12</u>			
Brief description: <b>Household Tools</b>	<u>\$20.00</u>	<input checked="" type="checkbox"/> <b>\$20.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>14</u>			
Brief description: <b>Keyboard</b>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <b>\$50.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>14</u>			
Brief description: <b>Drums</b>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <b>\$50.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from <i>Schedule A/B</i> : <u>14</u>			
Brief description: <b>Holiday Decorations</b>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <b>\$100.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Line from <i>Schedule A/B</i> : <u>14</u>			
Brief description: <b>Cash</b>	<u>\$40.00</u>	<input checked="" type="checkbox"/> <b>\$40.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Line from <i>Schedule A/B</i> : <u>16</u>			
Brief description: <b>Smart Financial Credit Union #4930</b>	<u>\$15.01</u>	<input checked="" type="checkbox"/> <b>\$15.01</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Line from <i>Schedule A/B</i> : <u>17.1</u>			
Brief description: <b>Smart Financial Credit Union #4940</b>	<u>\$10.17</u>	<input checked="" type="checkbox"/> <b>\$10.17</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Line from <i>Schedule A/B</i> : <u>17.3</u>			
Brief description: <b>Wells Fargo Bank #2994</b>	<u>\$8,972.90</u>	<input checked="" type="checkbox"/> <b>\$8,972.90</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Line from <i>Schedule A/B</i> : <u>17.2</u>			

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
Brief description: <b>Wells Fargo Bank #8908</b>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <b>\$0.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Line from <i>Schedule A/B</i> : <u>17.4</u>			
Brief description: <b>Wells Fargo IRA (open but unfunded)</b>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <b>\$0.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(12)</b>
Line from <i>Schedule A/B</i> : <u>21</u>			
Brief description: <b>Boise Cascade Company 401(k) Plan</b>	<u>\$4,000.00</u>	<input checked="" type="checkbox"/> <b>\$4,000.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(12)</b>
Line from <i>Schedule A/B</i> : <u>21</u>			
Brief description: <b>Current wages</b>	<u>\$1,641.20</u>	<input checked="" type="checkbox"/> <b>\$1,641.20</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Line from <i>Schedule A/B</i> : <u>30</u>			
Brief description: <b>Lincoln Benefit Life Company</b>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <b>\$0.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(7)</b>
Line from <i>Schedule A/B</i> : <u>31</u>			
Brief description: <b>Lincoln Benefit Life Company</b>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <b>\$0.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(7)</b>
Line from <i>Schedule A/B</i> : <u>31</u>			
Brief description: <b>Employer paid life insurance</b>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <b>\$0.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(7)</b>
Line from <i>Schedule A/B</i> : <u>31</u>			
Brief description: <b>Unpaid child care fees for KidCare Learning Academy</b>	<u>\$1,100.00</u>	<input checked="" type="checkbox"/> <b>\$1,100.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Line from <i>Schedule A/B</i> : <u>38</u>			

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13

**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Brief description:		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
<b>2 Office computers \$250.00</b> <b>Office desk \$75.00</b> <b>Office chair \$50.00</b> <b>Office printer \$100.00</b> <b>8 Playpens \$60.00</b> <b>29 Cots \$200.00</b> <b>9 Highchairs \$90.00</b> <b>3 Infant chair/bouncers \$15.00</b> <b>3 Walkers \$20.00</b> <b>6 Classroom tables \$300.00</b> <b>5 Cafeteria serving tables \$50.00</b> <b>65 Children chairs \$100.00</b> <b>Television \$20.00</b> <b>2 Radio/cd players \$40.00</b> <b>8 Shelves \$60.00</b> <b>3 Drawers \$15.00</b> <b>Refrigerator \$200.00</b> <b>Microwave \$50.00</b> <b>5 Kitchen storage and shelves \$400.00</b> <b>Kitchen serving island \$100.00</b> <b>Children's toys \$100.00</b>	<u>\$2,295.00</u>	<input checked="" type="checkbox"/> <b>\$2,295.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>

Line from *Schedule A/B*: 39

**Fill in this information to identify your case:**

Debtor 1	<b>IRA</b> First Name	<b>CHARLES</b> Middle Name	<b>GAMBLE, II</b> Last Name
Debtor 2 (Spouse, if filing)	<b>CRYSTAL</b> First Name	<b>LASHAWN</b> Middle Name	<b>GAMBLE</b> Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)	<b>16-36498-H1-13</b>		

Check if this is an amended filing

**Official Form 106D****Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

- 2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

<i>Column A</i> <b>Amount of claim</b> Do not deduct the value of collateral	<i>Column B</i> <b>Value of collateral that supports this claim</b>	<i>Column C</i> <b>Unsecured portion</b> If any
--	--	---

2.1	Describe the property that secures the claim:  <b>American Credit Acceptance LLC</b> Creditor's name <b>961 E. Main St.</b> Number Street	\$8,178.37	\$5,000.00	\$3,178.37
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**As of the date you file, the claim is:** Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset)

- Who owes the debt?** Check one.  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim relates to a community debt

Date debt was incurred 2/2011 Last 4 digits of account number 1 0 0 1

Add the dollar value of your entries in Column A on this page. Write that number here:

\$8,178.37

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) **16-36498-H1-13****Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
--	--	---

2.2	Describe the property that secures the claim:	<b>\$5,502.00</b>	<b>\$3,000.00</b>	<b>\$2,502.00</b>
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**Conns Credit Corp**

Creditor's name

**3295 College St**

Number Street

**As of the date you file, the claim is:** Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

**Check if this claim relates to a community debt**Date debt was incurred **10/2015**

Last 4 digits of account number

**5 0 3 0**

2.3

2.3	Describe the property that secures the claim:	<b>\$3,775.00</b>	<b>\$2,000.00</b>	<b>\$1,775.00</b>
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**Conns Credit Corp**

Creditor's name

**3295 College St**

Number Street

**As of the date you file, the claim is:** Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

**Check if this claim relates to a community debt**Date debt was incurred **07/2016**

Last 4 digits of account number

**8 6 3 3**

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$9,277.00**

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

<i>Column A</i>	<i>Column B</i>	<i>Column C</i>
<b>Amount of claim</b>	<b>Value of collateral that supports this claim</b>	<b>Unsecured portion if any</b>

2.4

Describe the property that secures the claim:

\$986.28

\$180,000.00

**Estates of Teal Run HOA**

Creditor's name

**1225 Alma Road**

Number Street

**Principal Residence**

**Richardson TX 75081**  
 City State ZIP Code

**Who owes the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number 5 8 1 3**As of the date you file, the claim is:** Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset)

3823 Teal Maple Ct

Fresno, TX 77545

2.5

Describe the property that secures the claim:

\$3,203.00

\$5,000.00

**Go Credit Financial**

Creditor's name

**7465 E. Hampton Ave.**

Number Street

**As of the date you file, the claim is:** Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset)

Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here:

\$4,189.28

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

*Column A*  
**Amount of claim**  
 Do not deduct the value of collateral

*Column B*  
**Value of collateral that supports this claim**

*Column C*  
**Unsecured portion if any**

2.6

Describe the property that secures the claim:

\$592.00\$4,000.00**Lobel Financial Corp**

Creditor's name

**Po Box 3000**

Number Street

**As of the date you file, the claim is:** Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

**Check if this claim relates to a community debt**

Date debt was incurred 09/2013

Last 4 digits of account number

7 2 2 22.7

Describe the property that secures the claim:

\$9,922.75\$9,000.00\$922.75**Lucky Star Motors**

Creditor's name

**1940 Highway 6 North**

Number Street

**As of the date you file, the claim is:** Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

**Check if this claim relates to a community debt**

Date debt was incurred 1/2016

Last 4 digits of account number

4 1 7 4

Add the dollar value of your entries in Column A on this page. Write that number here:

\$10,514.75

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
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2.8	Describe the property that secures the claim:	<u>\$230,254.00</u>	<u>\$180,000.00</u>	<u>\$50,254.00</u>
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**Nationstar Mortgage LLC**

Creditor's name

**PO Box 619094**

Number Street

Principal Residence

**As of the date you file, the claim is:** Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

**Check if this claim relates to a community debt**

Date debt was incurred 07/2006

Last 4 digits of account number

8 3 5 1

2.9	Describe the property that secures the claim:	<u>\$5,500.00</u>	<u>\$5,500.00</u>
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**Nationstar Mortgage LLC**

Creditor's name

**PO Box 619094**

Number Street

Principal Residence

**As of the date you file, the claim is:** Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

**Arrearage claim**

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

**Check if this claim relates to a community debt**

Date debt was incurred Various

Last 4 digits of account number

8 3 5 1

Add the dollar value of your entries in Column A on this page. Write that number here:

<u>\$235,754.00</u>
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Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) **16-36498-H1-13****Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
--	--	---

2.10	Describe the property that secures the claim:	<b>\$45,000.00</b>	<b>\$180,000.00</b>	<b>\$45,000.00</b>
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**Real Time Resolutions, Inc.**

Creditor's name

**PO Box 36655**

Number Street

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

 Check if this claim relates to a community debtDate debt was incurred **2006**Last 4 digits of account number **6 7 6 4****3823 Teal Maple Ct****Fresno, TX 77545**

2.11

Describe the property that secures the claim:

**\$29,174.71****\$20,000.00****\$9,174.71****Santander Consumer USA**

Creditor's name

**Po Box 961245**

Number Street

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

 Check if this claim relates to a community debtDate debt was incurred **08/2014**Last 4 digits of account number **1 0 0 0**

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$74,174.71**

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

**\$342,088.11**

**Fill in this information to identify your case:**

Debtor 1	<b>IRA</b> First Name	<b>CHARLES</b> Middle Name	<b>GAMBLE, II</b> Last Name
Debtor 2 (Spouse, if filing)	<b>CRYSTAL</b> First Name	<b>LASHAWN</b> Middle Name	<b>GAMBLE</b> Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)	<b>16-36498-H1-13</b>		

Check if this is an amended filing

**Official Form 106E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

## 1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.  
 Yes.

## 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
\$400.00	\$400.00	\$0.00

**Attorney General Office**

Priority Creditor's Name  
**Child Support Enforcement**

Number Street  
**6161 Savoy, Ste. 320**

Last 4 digits of account number

When was the debt incurred?

**Houston TX 77036**  
City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Who incurred the debt? Check one.**

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

**Type of PRIORITY unsecured claim:**

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify

**Is the claim subject to offset?**

- No  
 Yes

**Child support arrearage only. No ongoing payments required.**

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 1: Your PRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim	Priority amount	Nonpriority amount
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2.2	\$3,200.00	\$3,200.00	\$0.00
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**David L. Venable, Attorney at Law**

Priority Creditor's Name

**12200 Northwest Freeway**

Number Street

**Suite 316**

Last 4 digits of account number

When was the debt incurred?

**Houston TX 77092**  
 City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Who incurred the debt?** Check one.  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Type of PRIORITY unsecured claim:**

- Domestic support obligations
- Taxes and certain other debts you owe the government
- Claims for death or personal injury while you were intoxicated
- Other. Specify

Is the claim subject to offset?

**Attorney fees for this case**

No  
 Yes

2.3	\$387.96	\$387.96	\$0.00
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**IRS/Special Procedure Branch**

Priority Creditor's Name

**PO Box 7346**

Number Street

Last 4 digits of account number

**7 2 8 8**

When was the debt incurred?

**Philadelphia PA 19101-7346**  
 City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Who incurred the debt?** Check one.  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Type of PRIORITY unsecured claim:**

- Domestic support obligations
- Taxes and certain other debts you owe the government
- Claims for death or personal injury while you were intoxicated
- Other. Specify

Is the claim subject to offset?

No  
 Yes

2.4	\$1,618.95	\$1,349.20	\$269.75
-----	------------	------------	----------

**Texas Workforce Commission**

Priority Creditor's Name

**101 E. 15th St. Room 556**

Number Street

Last 4 digits of account number

**2015-2016**

When was the debt incurred?

**Austin TX 78778-0001**  
 City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Who incurred the debt?** Check one.  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Type of PRIORITY unsecured claim:**

- Domestic support obligations
- Taxes and certain other debts you owe the government
- Claims for death or personal injury while you were intoxicated
- Other. Specify

Is the claim subject to offset?

No  
 Yes

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.**

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

**Total claim**

4.1		<u>\$2,299.26</u>
<b>Advantage Assets II, Inc.</b> Nonpriority Creditor's Name <u>7322 Southwest Freeway, Suite 1600</u> Number Street <hr/> <b>Houston TX 77074</b> City State ZIP Code		<b>Last 4 digits of account number</b> <u>      </u> <b>When was the debt incurred?</b> <u>      </u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Judgment Debt</b>
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

4.2		<u>\$762.77</u>
<b>AT&amp;T Services, Inc.</b> Nonpriority Creditor's Name <u>One AT&amp;T Way, Room 3A 231</u> Number Street <hr/> <b>Bedminster NJ 07921</b> City State ZIP Code		<b>Last 4 digits of account number</b> <u>5 6 6 5</u> <b>When was the debt incurred?</b> <u>      </u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Services</b>
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.3	<p><b>Biz Advance Now, LLC</b>      Nonpriority Creditor's Name  <u>1 Liberty Plaza, 46th Floor</u>      Number Street</p> <p><b>New York NY 10006</b>      City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input checked="" type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<b>\$0.00</b>
<p><b>Last 4 digits of account number</b> <u>      </u></p> <p><b>When was the debt incurred?</b> <u>7/2016</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Loan</b></p>		
<p>4.4</p> <p><b>Caine &amp; Weiner</b>      Nonpriority Creditor's Name  <u>Po Box 5010</u>      Number Street</p> <p><b>Woodland Hills CA 91365</b>      City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input checked="" type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>		<b>\$141.00</b>
<p><b>Last 4 digits of account number</b> <u>0 5 2 9</u></p> <p><b>When was the debt incurred?</b> <u>05/2016</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Collection Attorney</b></p>		
<p>4.5</p> <p><b>Capital One Bank</b>      Nonpriority Creditor's Name  <u>15000 Capital One Dr</u>      Number Street</p> <p><b>Richmond VA 23238</b>      City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>		<b>\$188.00</b>
<p><b>Last 4 digits of account number</b> <u>2 9 4 3</u></p> <p><b>When was the debt incurred?</b> <u>03/2016</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Credit Card</b></p>		

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.6		<u>\$1,924.03</u>
<b>Chase</b> Nonpriority Creditor's Name <u>PO Box 15298</u> Number Street <hr/> <b>Wilmington DE 19850-5298</b> City State ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		<b>Last 4 digits of account number</b> <u>3 2 0 0</u> <b>When was the debt incurred?</b> <hr/> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>
4.7		<u>\$5,000.00</u>
<b>Commercial Asset Recovery</b> Nonpriority Creditor's Name <u>14 Wall St, 20th Floor</u> Number Street <hr/> <b>New York NY 10005</b> City State ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		<b>Last 4 digits of account number</b> <u>      </u> <b>When was the debt incurred?</b> <hr/> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>?</b>
4.8		<u>\$525.00</u>
<b>Credit One Bank, N.A.</b> Nonpriority Creditor's Name <u>Po Box 98875</u> Number Street <hr/> <b>Las Vegas NV 89193</b> City State ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		<b>Last 4 digits of account number</b> <u>9 6 7 7</u> <b>When was the debt incurred?</b> <u>08/2014</u> <hr/> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.9		<b>\$2,860.00</b>
<b>Dept Of Education/Navient</b>		Last 4 digits of account number <u>2 0 4 9</u>
Nonpriority Creditor's Name <b>PO Box 9635</b>		When was the debt incurred? <u>07/2009</u>
Number Street		As of the date you file, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Wilkes-Barre PA 18773</b>		Type of NONPRIORITY unsecured claim:
City	State	ZIP Code
Who incurred the debt? Check one.		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.10		<b>\$137.00</b>
<b>Diversified Credit Sys</b>		Last 4 digits of account number <u>5 4 9 1</u>
Nonpriority Creditor's Name <b>706 Glencrest Ln Ste A</b>		When was the debt incurred? <u>06/2014</u>
Number Street		As of the date you file, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Longview TX 75601</b>		Type of NONPRIORITY unsecured claim:
City	State	ZIP Code
Who incurred the debt? Check one.		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.11		<b>\$0.00</b>
<b>Everest Business Funding</b>		Last 4 digits of account number <u>      </u>
Nonpriority Creditor's Name <b>2001 NW 107th Ave, 3rd Floor</b>		When was the debt incurred? <u>12/2014</u>
Number Street		As of the date you file, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Miami FL 33172</b>		Type of NONPRIORITY unsecured claim:
City	State	ZIP Code
Who incurred the debt? Check one.		
<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.12****\$41,141.95****Fed Loan Servicing**

Nonpriority Creditor's Name

**PO Box 69184**

Number Street

Last 4 digits of account number 0 0 2 6When was the debt incurred? 08/2010

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Harrisburg PA 17106-9184**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify \_\_\_\_\_

**4.13****\$1,833.00****First Data**

Nonpriority Creditor's Name

**265 Broad Hollow Rd**

Number Street

Last 4 digits of account number 0 0 0 0When was the debt incurred? 10/01/2016

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Melville NY 11747**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify \_\_\_\_\_

**Lease****4.14****\$382.85****Fort Bend County TRA**

Nonpriority Creditor's Name

**16107 Kensington Dr. #1008**

Number Street

Last 4 digits of account number \_\_\_\_\_When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Sugar Land TX 77479**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify \_\_\_\_\_

**Toll Fees**

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**\$306,135.00**4.15**

**Jung H. Kwak**  
 Nonpriority Creditor's Name  
**2621 Sunfish Dr.**  
 Number Street

Last 4 digits of account number       When was the debt incurred? 4/2014

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Pearland TX 77584-3041**  
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

## Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Breach of Lease**

**4.16**\$184.00

**Medicredit**  
 Nonpriority Creditor's Name  
**Po Box 1629**  
 Number Street

Last 4 digits of account number 1 6 1 7When was the debt incurred?           

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Maryland Heights MO 63043**  
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

## Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Medical Services**

**4.17**\$0.00

**Merchant Cash & Capital**  
 Nonpriority Creditor's Name  
**460 Park Avenue South, 10th Floor**  
 Number Street

Last 4 digits of account number       When was the debt incurred? 9/2014

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**New York NY 10016**  
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

## Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Loan**

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.18****\$3,439.83****Midland Funding, LLC**

Nonpriority Creditor's Name

**16 McLeland Rd, Suite 101**

Number Street

Last 4 digits of account number 1 4 7 2

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

City **MN** State **56303**

ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Collecting Agency**

**4.19****\$132.11****Music & Arts Centers**

Nonpriority Creditor's Name

**4626 Wedgewood Blvd**

Number Street

Last 4 digits of account number 6 6 8 6

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

City **MD** State **21703-7159**

ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

**4.20****\$6,102.00****New Era Lending LLC**

Nonpriority Creditor's Name

**North Orange St. Suite 762**

Number Street

Last 4 digits of account number       When was the debt incurred? 10/2014

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

City **DE** State **19801**

ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Loan**

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**\$50.98

4.21	<b>Pediatric Pathology Consultants</b> Nonpriority Creditor's Name <u>PO Box 1907</u> Number Street  <u>Greenville</u> <u>TX</u> <u>75403</u> City                State           ZIP Code	Last 4 digits of account number <u>6</u> <u>4</u> <u>2</u> <u>2</u>
		When was the debt incurred?
		As of the date you file, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>Type of NONPRIORITY unsecured claim:</b>
		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify

**Who incurred the debt?** Check one.  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

4.22	<b>Revenue Recovery Corp</b> Nonpriority Creditor's Name <u>Po Box 50250</u> Number Street  <u>Knoxville</u> <u>TN</u> <u>37950</u> City                State           ZIP Code	Last 4 digits of account number <u>0</u> <u>6</u> <u>6</u> <u>4</u>
		When was the debt incurred? <u>03/2015</u>
		As of the date you file, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>Type of NONPRIORITY unsecured claim:</b>
		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify

**Who incurred the debt?** Check one.  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

4.23	<b>St. Lukes Hospital</b> Nonpriority Creditor's Name <u>PO Box 4288</u> Number Street  <u>Houston</u> <u>TX</u> <u>77210-4288</u> City                State           ZIP Code	Last 4 digits of account number <u>0</u> <u>7</u> <u>0</u> <u>4</u>
		When was the debt incurred? <u>5/2015</u>
		As of the date you file, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>Type of NONPRIORITY unsecured claim:</b>
		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify

**Who incurred the debt?** Check one.  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.24****\$15,855.03****Texas Children's Hospital**

Nonpriority Creditor's Name

**PO Box 4494**

Number Street

Last 4 digits of account number 4 8 1 4When was the debt incurred? Sep-Oct 2015

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

City **Houston** State **TX** ZIP Code **77210**

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Medical Services**

**4.25****\$200.00****Texas Children's Physician**

Nonpriority Creditor's Name

**Services Organization**

Number Street

**PO Box 4984**Last 4 digits of account number 7 0 1 9When was the debt incurred? 10/2015

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

City **Houston** State **TX** ZIP Code **77210-4984**

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Medical Services**

**4.26****\$12,000.00****The Fundworks, LLC**

Nonpriority Creditor's Name

**15260 Ventura Blvd #1430**

Number Street

Last 4 digits of account number       When was the debt incurred?             

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

City **Sherman Oaks** State **CA** ZIP Code **91403**

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **?**

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**\$950.00**Woodforest National Bank**

Nonpriority Creditor's Name

**PO Box 7089**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**The Woodlands TX 77387**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Bank Charges**

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

**Asset Recovery Solutions LLC**

Name  
**2200 E. Devon Ave Suite 200**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.6 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Des Plaines IL 60018-4501**  
 City State ZIP Code

Last 4 digits of account number 7 5 0 2**Attorney General Office**

Name  
**PO Box 12017**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.4 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Austin TX 78711**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_**Convergent Outsourcing, Inc.**

Name  
**PO Box 9004**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.18 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Renton WA 98057**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_**Credit America**

Name  
**101 Grovers Mill Rd, Suite 303**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.19 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Lawrenceville NJ 08648-4706**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_**Harris & Harris, Ltd.**

Name  
**111 West Jackson Blvd., Suite 400**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.24 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Chicago IL 60604-4135**  
 City State ZIP Code

Last 4 digits of account number 9 8 1 9

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****IC Systems, Inc.**

Name  
**PO Box 64378**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.2 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**St. Paul**      **MN**      **55164-0378**  
 City                State        ZIP Code

Last 4 digits of account number \_\_\_\_\_

**IRS/Special Procedures Dept.**

Name  
**Attn: BK Section**  
 Number Street  
**Mail Code 5024HOU**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.3 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**1919 Smith Street**

**Houston**      **TX**      **77002**  
 City                State        ZIP Code

Last 4 digits of account number \_\_\_\_\_

**J. Daniel Wilson**

Name  
**Hildebrand & Wilson LLP**  
 Number Street  
**7930 Broadway Suite 122**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.15 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Pearland**      **TX**      **77581**  
 City                State        ZIP Code

Last 4 digits of account number \_\_\_\_\_

**Michael J. Scott**

Name  
**1120 Metrocrest Dr. Ste. 100**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.1 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Carrollton**      **TX**      **75006**  
 City                State        ZIP Code

Last 4 digits of account number \_\_\_\_\_

**Perdue Brandon Fielder Collins & Mott**

Name  
**Attorneys at Law**  
 Number Street  
**1235 North Loop West #600**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.14 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Houston**      **TX**      **77008**  
 City                State        ZIP Code

Last 4 digits of account number \_\_\_\_\_

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.  
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

	Total claim
<b>Total claims from Part 1</b>	
6a. Domestic support obligations	6a. <u>\$400.00</u>
6b. Taxes and certain other debts you owe the government	6b. <u>\$2,006.91</u>
6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$3,200.00</u>
6e. <b>Total.</b> Add lines 6a through 6d.	<b>6d.</b> <u>\$5,606.91</u>

	Total claim
<b>Total claims from Part 2</b>	
6f. Student loans	6f. <u>\$44,001.95</u>
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$358,546.77</u>
6j. <b>Total.</b> Add lines 6f through 6i.	<b>6j.</b> <u>\$402,548.72</u>

**Fill in this information to identify your case:**

Debtor 1	<u>IRA</u> First Name	<u>CHARLES</u> Middle Name	<u>GAMBLE, II</u> Last Name
Debtor 2 (Spouse, if filing)	<u>CRYSTAL</u> First Name	<u>LASHAWN</u> Middle Name	<u>GAMBLE</u> Last Name
United States Bankruptcy Court for the: <u>SOUTHERN DISTRICT OF TEXAS</u>			
Case number (if known)	<u>16-36498-H1-13</u>		

Check if this is an amended filing

**Official Form 106G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.**

Person or company with whom you have the contract or lease	State what the contract or lease is for
--	---

<b>2.1 CECO Partners</b> Name <b>PO Box 2517</b> Number Street	<b>Lease of premises at</b> <b>12125 Highway 6, Ste C</b> <b>Fresno, TX 77545</b> <b>Contract to be ASSUMED</b>
<b>Sugar Land</b> City	<b>TX</b> State <b>77487</b> ZIP Code

**Fill in this information to identify your case:**

Debtor 1	<b>IRA</b> First Name	<b>CHARLES</b> Middle Name	<b>GAMBLE, II</b> Last Name
Debtor 2 (Spouse, if filing)	<b>CRYSTAL</b> First Name	<b>LASHAWN</b> Middle Name	<b>GAMBLE</b> Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)	<b>16-36498-H1-13</b>		

Check if this is an amended filing

**Official Form 106H****Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

No  
 Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  
 No  
 Yes

In which community state or territory did you live? Texas Fill in the name and current address of that person.

**CRYSTAL LASHAWN GAMBLE**

Name of your spouse, former spouse, or legal equivalent

**3823 Teal Maple Ct**

Number Street

**Fresno**                   **TX**                   **77545**  
 City                         State                     ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

*Column 1: Your codebtor*

*Column 2: The creditor to whom you owe the debt*

Check all schedules that apply:

**Fill in this information to identify your case:**

Debtor 1	<b>IRA</b> First Name	<b>CHARLES</b> Middle Name	<b>GAMBLE, II</b> Last Name
Debtor 2 (Spouse, if filing)	<b>CRYSTAL</b> First Name	<b>LASHAWN</b> Middle Name	<b>GAMBLE</b> Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)	<b>16-36498-H1-13</b>		

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

**Official Form 106I****Schedule I: Your Income****12/15**

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment****1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	<b>Debtor 1</b>	<b>Debtor 2 or non-filing spouse</b>
<b>Employment status</b>	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
<b>Occupation</b>	<b>Driver</b>	<b>Self-Employed</b>
<b>Employer's name</b>	<b>Boise Cascade Company</b>	
<b>Employer's address</b>	<b>1111 W. Jefferson St.</b> Number Street <b>Suite 300</b>	<b>12125 Hwy 6 Ste C</b> Number Street

<b>Boise</b> City	<b>ID</b> State	<b>83702-538</b> Zip Code	<b>Fresno</b> City	<b>TX</b> State	<b>77545</b> Zip Code
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How long employed there? **March 2016** **2012**

**Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	<b>For Debtor 1</b>	<b>For Debtor 2 or non-filing spouse</b>
<b>2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.</b>	<b>2. \$3,064.49</b>	<b>\$0.00</b>
<b>3. Estimate and list monthly overtime pay.</b>	<b>3. + \$1,723.78</b>	<b>\$0.00</b>
<b>4. Calculate gross income. Add line 2 + line 3.</b>	<b>4. \$4,788.27</b>	<b>\$0.00</b>

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) **16-36498-H1-13**

	For Debtor 1	For Debtor 2 or non-filing spouse
<b>Copy line 4 here .....</b> ➔ 4.	<b>\$4,788.27</b>	<b>\$0.00</b>
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. <b>\$595.25</b>	<b>\$0.00</b>
5b. Mandatory contributions for retirement plans	5b. <b>\$0.00</b>	<b>\$0.00</b>
5c. Voluntary contributions for retirement plans	5c. <b>\$287.30</b>	<b>\$0.00</b>
5d. Required repayments of retirement fund loans	5d. <b>\$0.00</b>	<b>\$0.00</b>
5e. Insurance	5e. <b>\$455.72</b>	<b>\$0.00</b>
5f. Domestic support obligations	5f. <b>\$0.00</b>	<b>\$0.00</b>
5g. Union dues	5g. <b>\$0.00</b>	<b>\$0.00</b>
5h. Other deductions. Specify: _____	5h. + <b>\$0.00</b>	<b>\$0.00</b>
<b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	<b>6. <u>\$1,338.27</u></b>	<b>\$0.00</b>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	<b>7. <u>\$3,450.00</u></b>	<b>\$0.00</b>
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm	8a. <b>\$0.00</b>	<b>\$3,654.00</b>
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.		
8b. Interest and dividends	8b. <b>\$0.00</b>	<b>\$0.00</b>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c. <b>\$0.00</b>	<b>\$0.00</b>
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		
8d. Unemployment compensation	8d. <b>\$0.00</b>	<b>\$0.00</b>
8e. Social Security	8e. <b>\$0.00</b>	<b>\$0.00</b>
8f. Other government assistance that you regularly receive		
Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		
Specify: <b>Granddaughter's Social Security</b>	8f. <b>\$733.00</b>	<b>\$0.00</b>
8g. Pension or retirement income	8g. <b>\$0.00</b>	<b>\$0.00</b>
8h. Other monthly income. Specify: _____	8h. + <b>\$0.00</b>	<b>\$0.00</b>
<b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	<b>9. <u>\$733.00</u></b>	<b><u>\$3,654.00</u></b>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	<b>10. <u>\$4,183.00</u></b>	<b>+ <u>\$3,654.00</u> = <u>\$7,837.00</u></b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.		
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.		
Specify: _____	11. + <b>\$0.00</b>	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.	<b>12. <u>\$7,837.00</u></b>	<b>Combined monthly income</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>		
<input checked="" type="checkbox"/> No. <b>None.</b>		
<input type="checkbox"/> Yes. Explain:		

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13

8a. Attached Statement (Debtor 2)

**Day Care**

**Gross Monthly Income:**

\$25,750.00

<u>Expense</u>	<u>Category</u>	<u>Amount</u>
Rent		<u>\$5,533.00</u>
Payroll		<u>\$14,333.00</u>
Electric		<u>\$450.00</u>
Phone		<u>\$202.00</u>
Fire Alarm		<u>\$180.00</u>
Bus operation		<u>\$340.00</u>
Website		<u>\$60.00</u>
Advertising		<u>\$100.00</u>
Credit/Debit card machine		<u>\$100.00</u>
Insurance		<u>\$325.00</u>
Office supplies		<u>\$160.00</u>
Postage		<u>\$35.00</u>
Materials and supplies		<u>\$139.00</u>
Travel and entertainment		<u>\$139.00</u>
<b>Total Monthly Expenses</b>		<u><b>\$22,096.00</b></u>
<b>Net Monthly Income:</b>		<u><b>\$3,654.00</b></u>

**Fill in this information to identify your case:**

Debtor 1	<b>IRA</b> First Name	<b>CHARLES</b> Middle Name	<b>GAMBLE, II</b> Last Name
Debtor 2 (Spouse, if filing)	<b>CRYSTAL</b> First Name	<b>LASHAWN</b> Middle Name	<b>GAMBLE</b> Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)	<b>16-36498-H1-13</b>		

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

**Official Form 106J****Schedule J: Your Expenses****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household****1. Is this a joint case?**

- No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?  
 No  
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

**2. Do you have dependents?**

Do not list Debtor 1 and Debtor 2.

 No Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Son	15	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Son	9	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Son	13	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Granddaughter	2	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes

**3. Do your expenses include expenses of people other than yourself and your dependents?**

- No  
 Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

	<u>Your expenses</u>
<b>4. The rental or home ownership expenses for your residence.</b> Include first mortgage payments and any rent for the ground or lot.	4. <b>\$0.00</b> (See continuation sheet(s) for details)
<b>If not included in line 4:</b>	
4a. Real estate taxes	4a. _____
4b. Property, homeowner's, or renter's insurance	4b. _____
4c. Home maintenance, repair, and upkeep expenses	4c. <b>\$140.00</b>
4d. Homeowner's association or condominium dues	4d. <b>\$39.00</b>

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13

		<u>Your expenses</u>
5.	<b>Additional mortgage payments for your residence</b> , such as home equity loans	5. _____
6.	<b>Utilities:</b>	
6a.	Electricity, heat, natural gas	6a. _____ \$350.00
6b.	Water, sewer, garbage collection	6b. _____ \$100.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. _____ \$505.00
6d.	Other. Specify: <u>Alarm</u>	6d. _____ \$60.00
7.	<b>Food and housekeeping supplies</b>	7. _____ \$960.00
8.	<b>Childcare and children's education costs</b>	8. _____ \$10.00
9.	<b>Clothing, laundry, and dry cleaning</b>	9. _____ \$160.00
10.	<b>Personal care products and services</b>	10. _____ \$70.00
11.	<b>Medical and dental expenses</b>	11. _____ \$290.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. _____ \$648.00
13.	<b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. _____ \$125.00
14.	<b>Charitable contributions and religious donations</b>	14. _____ \$250.00
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. _____ \$100.00
15b.	Health insurance	15b. _____
15c.	Vehicle insurance	15c. _____ \$460.00
15d.	Other insurance. Specify: _____	15d. _____
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>Income Taxes</u>	16. _____ \$570.00
17.	<b>Installment or lease payments:</b>	
17a.	Car payments for Vehicle 1	17a. _____
17b.	Car payments for Vehicle 2	17b. _____
17c.	Other. Specify: _____	17c. _____
17d.	Other. Specify: _____	17d. _____
18.	<b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. _____
19.	<b>Other payments you make to support others who do not live with you.</b> Specify: _____	19. _____

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) **16-36498-H1-13**

**20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

- |   |            |
|---|------------|
| 20a. Mortgages on other property                  | 20a. _____ |
| 20b. Real estate taxes                            | 20b. _____ |
| 20c. Property, homeowner's, or renter's insurance | 20c. _____ |
| 20d. Maintenance, repair, and upkeep expenses     | 20d. _____ |
| 20e. Homeowner's association or condominium dues  | 20e. _____ |

**21. Other.** Specify: \_\_\_\_\_

21. + \_\_\_\_\_

**22. Calculate your monthly expenses.**

- |   |                              |
|---|------------------------------|
| 22a. Add lines 4 through 21.  | 22a. _____ <b>\$4,837.00</b> |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. | 22b. _____                   |
| 22c. Add line 22a and 22b. The result is your monthly expenses.                       | 22c. _____ <b>\$4,837.00</b> |

**23. Calculate your monthly net income.**

- |   |                                |
|---|--------------------------------|
| 23a. Copy line 12 (your combined monthly income) from Schedule I.                                       | 23a. _____ <b>\$7,837.00</b>   |
| 23b. Copy your monthly expenses from line 22c above.  | 23b. - _____ <b>\$4,837.00</b> |
| 23c. Subtract your monthly expenses from your monthly income.<br>The result is your monthly net income. | 23c. _____ <b>\$3,000.00</b>   |

**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes. Explain here:  
**None.**

**4. The rental or home ownership expense for your residence (details):**

Ongoing mortgage payments included in the Chapter 13 plan

Total: \_\_\_\_\_ **\$0.00**

**Fill in this information to identify your case:**

Debtor 1	<b>IRA</b> First Name	<b>CHARLES</b> Middle Name	<b>GAMBLE, II</b> Last Name
Debtor 2 (Spouse, if filing)	<b>CRYSTAL</b> First Name	<b>LASHAWN</b> Middle Name	<b>GAMBLE</b> Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)	<b>16-36498-H1-13</b>		

Check if this is an amended filing

**Official Form 106Sum****Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

**Part 1: Summarize Your Assets**

**Your assets**  
Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B.....	<b>\$180,000.00</b>
1b. Copy line 62, Total personal property, from Schedule A/B.....	<b>\$69,014.28</b>
1c. Copy line 63, Total of all property on Schedule A/B.....	<b>\$249,014.28</b>

**Part 2: Summarize Your Liabilities**

**Your liabilities**  
Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.....	<b>\$342,088.11</b>
---	---------------------

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	<b>\$5,606.91</b>
---	-------------------

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	+ <b>\$402,548.72</b>
--	-----------------------

**Your total liabilities**

**\$750,243.74**

**Part 3: Summarize Your Income and Expenses**4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I.....	<b>\$7,837.00</b>
---	-------------------

5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....	<b>\$4,837.00</b>
---	-------------------

Debtor 1 **IRA CHARLES GAMBLE, II**  
 Debtor 2 **CRYSTAL LASHAWN GAMBLE**

Case number (if known) 16-36498-H1-13

**Part 4: Answer These Questions for Administrative and Statistical Records**

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
 Yes

**7. What kind of debt do you have?**

- Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
 **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

**\$7,254.94**

**9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**

**Total claim**

**From Part 4 on *Schedule E/F*, copy the following:**

9a. Domestic support obligations. (Copy line 6a.)	<b>\$400.00</b>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<b>\$2,006.91</b>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<b>\$0.00</b>
9d. Student loans. (Copy line 6f.)	<b>\$44,001.95</b>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<b>\$0.00</b>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	<b>+ \$0.00</b>
9g. <b>Total.</b> Add lines 9a through 9f.	<b>\$46,408.86</b>

**Fill in this information to identify your case:**

Debtor 1	<u>IRA</u> First Name	<u>CHARLES</u> Middle Name	<u>GAMBLE, II</u> Last Name
Debtor 2 (Spouse, if filing)	<u>CRYSTAL</u> First Name	<u>LASHAWN</u> Middle Name	<u>GAMBLE</u> Last Name
United States Bankruptcy Court for the: <u>SOUTHERN DISTRICT OF TEXAS</u>			
Case number (if known)	<u>16-36498-H1-13</u>		

Check if this is an amended filing

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ IRA CHARLES GAMBLE, II  
IRA CHARLES GAMBLE, II, Debtor 1

Date 01/28/2017  
MM / DD / YYYY

X /s/ CRYSTAL LASHAWN GAMBLE  
CRYSTAL LASHAWN GAMBLE, Debtor 2

Date 01/28/2017  
MM / DD / YYYY